

**AIR NATIONAL GUARD
Data Sheet
Clinical Pastoral Education**

Applying for: Fall_____ Winter_____ Spring_____ Summer_____
12 month residency_____ (stipend available; 4 units of CPE)
Extended Unit_____ (no stipend; 1-4 units of CPE)
Intensive up to 95 days (AD orders; per Diem authorized; 1 unit of CPE)
Preferred program/site (select from <http://www1.va.gov/chaplain/cpe>; indicate region and location)

Earliest date you can begin: _____

Applicant Information

Name: _____ (Rank, First, MI, Last)
Mailing address: _____ City: _____ State: _____ Zip _____
Mandatory Separation Date _____
Email (civilian): _____ Email (mil) _____
Day Tel.: _____
Cell Tel.: _____
Work Tel.: _____ DSN: _____
Denomination/Faith Group Affiliation: _____

Prior CPE Dates: Center, Supervisor

Are you scheduled to deploy? Yes or No (if so when) _____
Deployment history: dates and location(s)?

Wing Chaplain: Approval or Disapproved

Signature _____
Phone _____

CC: Approval or Disapproved

Signature _____ Phone: _____

Signature of applicant: _____ Date: _____

Final selection to be determined by local CPE center. ANG HC applicants must maintain regular drill status. (Except during AD summer intensive status). By signing and upon completion of CPE through NGB/VA cooperative limited initiative, applicant agrees to be considered for ANG HC assignments requiring CPE. Form 40A may be submitted for retirement points.

Please email this cover letter and standard military bio for review to:

Michael.reynolds@ang.af.mil or enio.aguero@ang.af.mil

301-836-7522

301-836-7316